Retail Food Inspection Report

Floyd County Health Department
Telephone (812) 948-4726

Establishment Name	Telephone Number	Date of Inspection	ID#
SLEEPY ROOSTER	Est 757-287-2510	06/13/2024	
Address 2204 STATE ST, NEW ALBANY IN 47150	Own		

Owner	Purpose	Follow Up	Released
JUAN SEGOVIANO	X Routine		06/13/2024
Owner's Address 3612 KERRY ANN WAY JEFFERSONVILLE, IN 47130	___ Follow-up		
Person in Charge ESEQUIEL SEGOVIANO	___ Complaint		
Responsible Person's Email VIVA.ZIQUIO@GMAIL.COM	___ Pre-Operational		
Certified Food Handler JUAN SEGOVIANO	___ Temporary	**Menu Type**	
	___ HACCP	1 __ 2 __ 3 X 4 __ 5 __	
	___ Other (list)		

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
294	X		X	Observed chlorine concentration in sani-buckets at <10ppm	CORRECTED
322	X		X	Observed an ABV on a mop sink with valves and elevated lines downstream. Observed gas equipment on wheels not secured to the wall with a safety chain.	3 WEEKS
257		X		Observed a broken thermometer inside of the bar cooler.	2 WEEKS

Summary of Violations C 2 NC 1 R 2 3

Received by (name and title printed):	Inspected by (name and title printed):
ESEQUIEL SEGOVIANO	John Klem EHS
Received by (signature):	Inspected by (signature): John Klem

cc:	cc:	cc: